FORM D

U.S. SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

1422604

OMB APPROVAL OMB NUMBER: 3235-0076 Expires: April 30, 2008

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OXICE OF SALE OF SECURITIES

UANT TO REGULATION D, CTION 4(6), AND/OR ÁMITED OFFERING EXEMPTION



Name of Offering (check if this is an an iame has changed, and indicate change.) NILE MASTER FUND LIMITED Rule 505 Rule 506 Section 4(6) Filing Under (Check box(es) that apply): Rule 504 Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) NILE MASTER FUND LIMITED (Number and Street, City, State, Zip Code) Telephone Number Address of Executive Offices (Including Area Code) c/o The Harbour Trust Company Limited, P.O. Box 897 GT, One Capital Place, George Town, Grand (345) 949 -7576 Cayman, Cayman Islands (Number and Street, City, State, Zip Code) Telephone Number Address of Principal Business Operations (Including Area Code) (if different from Executive Offices) Brief Description of Business JAN 08 2008 Securities MOSMOHT limited partnership, already limited Type of Business Organization other (please specify): corporation Cayman Islands exempted company limited partnership, to be formed business trust Month Year Actual A Estimated Actual or Estimated Date of Incomoration or Organization: 0 4 [0|5] [F][N] Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a pan of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Each benefit	cial owner having the	e power to vote or dispose, or dir	ect the vote or disposition of, 10%	6 or more of a class of e	quity securities of the issuer;			
• Each execut	 Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and 							
Each general and managing partner of partnership issuers.								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if i	ndividual)							
Slutz, III, Robert F.				<u>-</u>				
Business or Residence Address	(Number and Stree	t, City, State, Zip Code)						
c/o The Harbour Trust C	ompany Limited	, P.O. Box 897 GT, One C	Capital Place, George Town		Cayman Islands			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if i	ndividual)							
Mc Geough, David J.								
Business or Residence Address	(Number and Stree	et, City, State, Zip Code)						
c/o The Harbour Trust C	ompany Limited		Capital Place, George Town					
Check Box(es) that Apply;	Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner			
Full Name (Last name first, if	ndividual)	•						
Anderson, Peter			· ·					
Business or Residence Address	(Number and Stree	et, City, State, Zip Code)						
c/o The Harbour Trust C	ompany Limited		Capital Place, George Town					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if	individual)							
McCreery, Sean								
Business or Residence Address	(Number and Stree	et, City, State, Zip Code)						
Anderson Square, 4th I	Hoor, PO Box	0243, Grand Cayman, I	KY1-1003, Cayman Islan	nds				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if	individual)							
Business or Residence Address (Number and Street, City, State, Zip Code)								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if individual)								
					 -			
Business or Residence Address	s (Number and Stree	et, City, State, Zip Code)						
	(Uso	blank sheet, or copy and use ad	ditional copies of this sheet, as ne	cessary.)				

, 2.

• Enter the information requested for the following:

Each promoter of the issuer, if the issuer has been organized within the past five years;

					B. II	NFORM	ATION	ABOUT	OFFER	RING				
1.	Has the	issuer sold,	or does the	issuer inte	nd to sell, t	o non-accre	edited inves	tors in this	offering?					Yes No
					Answe	r also in Ap	pendix, Co	lumn 2, if f	iling under	ULOE.				
2.	What is	the minimu	ım investme	ent that wil	l be accepte	d from any	individual	?						*\$ <u>1,000,000</u>
	*Minim	um may be	waived by	Fund in its	discretion,	but in no ca	ise will mir	nimum be k	ss that \$10	0,000.				
3.										Yes №				
4.	Enter the solicitati dealer re persons	e information on of purel gistered wi of such a b	on requested tasers in co th the SEC roker or dea	d for each p nnection w and/or with	person who ith sales of h a state or	has been or securities in states, list the	will be par the offeri he name of	id or given, ng. If a pen the broker	directly or son to be lis or dealer.	indirectly, a sted is an as I more than	any commis	ssion or sim	nilar remune nt of a brok listed are as	ration for er or
Full Nam	ie (Last nai	me iirsi, ii	individual)											
Business	or Resider	nce Address	(Number a	and Street,	City, State,	Zip Code)								·
					•	·								
Name of	Associated	Broker or	Dealer			 						**		
Ctatas in	Which Don	non Lintod	Has Solicit	and on later	da en Culial	Durahaan								
						Purchasen	i							—
(Check	"All States [AL]	or check [AK]	individual: [AZ]	States)	[CA]	[CO]	[CΊ]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	All States
	[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[MÉ] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]	
Eull Mass	[RI]	[SC]	[SD] individual)	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
ruii Nan	ie (Last nai	me tirst, ii	inatviauai)											
Business	or Resider	nce Address	s (Number a	and Street,	City, State,	Zip Code)						<u></u>	<u>.</u>	<u></u>
Name of	Associated	Broker or	Dealer											
States in	Which Per	son Listed	Has Solicit	ed or Inten	ds to Solici	Purchasers	3	**						
(Check	"All States	" or check	individual !	States)										All States
`	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT}	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
Full Nam	ie (Last nai	me first, if	individual)									•		
Business	or Resider	nce Address	s (Number a	and Street,	City, State,	Zip Code)								
Name of	Associated	Broker or	Dealer											
States in	Which Per	son Listed	Has Solicit	ed or Inten	ds to Solici	Purchasers						····		
			individual :											Ali States
(Clicck	[AL] [IL] [MT]	[AK] [IN] [NE]	[AZ] [IA] [NV]	[AR] [KS] [NH]	[CA] [KY] [NJ]	[CO] [LA] [NM]	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] [MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA]	An states

TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US	E OF PROCEED	S
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of		
	the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$	\$
	Common Preferred		
	Convertible Securities (including warrants)	\$	\$
	Shares*	\$ <u>100,000,000</u>	\$ <u>6,345,174</u>
	Common Stock	\$	\$
	Total*	\$100,000,000	\$ <u>6,345,174</u>
	Answer also in Appendix, Column 3, if filing under ULOE.	\$ <u>100,000,000</u>	ψ <u>οίοποί17π</u>
	Allswer also in Appendix, Column 5, it timing under OLOL.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount Of Purchases
	Accredited Investors	6	\$6,345,174
	Non-accredited Investors	NA	\$ NA
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		D
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		\$
	Transfer Agent's Fees		\$ <u>0</u>
	Printing and Engraving Costs	⊠	\$ <u>10,000</u>
	Legal Fees	⊠	\$ <u>25,000</u>
	Accounting Fees	⊠	\$30,000
	Engineering Fees		\$ <u>0</u>
	Sales Commissions (specify finders' fees separately)		\$ <u>0</u>
	Other Expenses (identify) Miscellaneous (blue, sky fees, duplicating, courier, etc.)	⊠	\$10,000
	Total	⊠	\$ <u>75,000</u>
*This is	s a continuous offering. Therefore, the aggregate offering price could be greater than or less th	an this amount.	

•	C. OFFERING PRICE, NUMBER	R OF INVESTORS, EXPENSES AND USE O	F PROCEEDS	
		offering price given in response to Part C - ponse to Part C - Question 4.a. This difference		*\$99,925,000
5.	an estimate and check the box to the left of the	amount for any purpose is not known, furnish		
			Payments to Officers,	Parmonto To
			Directors, & Affiliates	Payments To Others
	Salaries and fees		□\$	□\$
	Purchase of real estate		□ \$	<u> </u>
	Purchase, rental or leasing and installation of i	nachinery and equipment	\$	\$
	Construction or leasing of plant buildings and	facilities	□ \$	\$
	Acquisition of other businesses (including the	value of securities involved in this offering		
	that may be used in exchange for the assets or		□\$	□ \$
	<u> </u>		□ \$	 \$
	• •		□ \$	□ \$ □ \$
	Other (specify): to be used as described in Issu		□\$	□ \$ <u></u>
	• • • •		□ Ψ	<u> </u>
			□ \$	
	Column Totals		□ \$	∑ \$99,925,000
	Total Payments Listed (column totals added)		⊠ \$9	<u>99,925,000</u>
		D. FEDERAL SIGNATURE		
follow	ng signature constitutes an undertaking by the	the undersigned duly authorized person. If the issuer to furnish to the U.S. Securities and Euer to any non-accredited investor pursuant to page	Exchange Commi	ission, upon written
Issuer (P	rint or Type)	Signature	Date	· · · · · · · · · · · · · · · · · · ·
NILE.	MASTER FUND LIMITED	Inder 97M	a	ula 18, 2007
Name of	Signer (Print or Type)	Title of Signer (Print or Type)		X
Andrev	v E. Feldman	General Counsel of Proxima Alfa Investments Manager of the Issuer	(USA) LLC, the	Investment

* See asterisked comment on p.4.

END

ATTENTION

Intentional misstatements or omissions of act constitute federal criminal violations. (See 18 U.S.C. 1001.)